



**Response To Notice To File Missing Parts Of Application  
Filing Date Granted (PTO-1533)(Small Entity)**

Docket No.  
227/04279

In Re Application Of: **Benny PESACH et al.**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/519,024	I.A. June 25, 2003	Unknown	44909	Unknown	3303

Invention: **METHOD AND APPARATUS FOR DETERMINING TISSUE VIABILITY**

Mail Stop Missing Parts

COMMISSIONER FOR PATENTS:

This is a response to the Notice to File Missing Parts of Application - Filing Date Granted (PTO-1533) mailed on  
\_\_\_\_ June 1, 2005 \_\_\_\_  
Date

Enclosed herewith for filing are the following:

- ☒ A copy of the Notice to File Missing Parts of Application - Filing Date Granted (PTO-1533). (REQUIRED)
- ☐ An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date.
- ☒ A properly signed oath or declaration in compliance with 37 CFR 1.63.
- ☐ An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date.
- ☐ A verified English translation of the non-English language application papers as originally filed. It is requested that this translation be used as the copy for examination purposes in the United States Patent and Trademark Office.
- ☐ \_\_\_\_\_ verified small entity declaration(s)
  - ☐ is/are attached.
  - ☐ was/were filed on \_\_\_\_\_
- ☐ A separate request for refund.
- ☐ Other (list):

#4

**Response To Notice To File Missing Parts Of Application  
Filing Date Granted (PTO-1533)(Small Entity)**

Docket No.  
227/04279

In Re Application Of:

Benny PESACH et al.

Application No.  
10/519,024

Filing Date  
LA. June 25, 2003

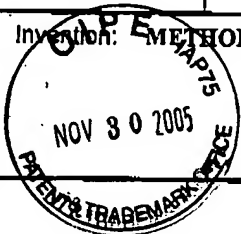
Examiner  
Unknown

Customer No.  
44909

Group Art Unit  
Unknown

Confirmation No.  
3303

Invention: **METHOD AND APPARATUS FOR DETERMINING TISSUE VIABILITY**



TO THE COMMISSIONER FOR PATENTS:

Mail Stop Missing Parts

☐ Completion of application fees as calculated below:

☐ Utility application basic fee

☐ Design application basic fee

☐ Search Fee

\$0.00

☐ Examination Fee

\$0.00

☐ Total number of independent claims =

☐ Total number of claims =

☐ Multiple dependent claims

☐ Surcharge for late payment of filing fee and/or late filing of original declaration or oath

☐ Petition and fee for filing by other than all the inventors or a person not the inventor

☐ Fee for processing an application filed with a non-English language specification

☐ Fee for processing and retention of application

Total completion of application fees

12/06/2005 ATRAN1 00000142 033419 10519024

01 FC:2254 795.00 DA

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the above-identified Notice to File Missing Parts of Application. The requested extension is as follows (check time period desired). If an additional time extension is required, please consider this a petition therefor.

☐ One month

☐ Two months

☐ Three months

☒ Four months

☐ Five months

from: August 1, 2005

Date

until: December 1, 2005

Date

Total time extension fees \$795.00

Total fees due \$795.00



**Response To Notice To File Missing Parts Of Application**  
**Filing Date Granted (PTO-1533) (Small Entity)**

Docket No.  
227/04279

In Re Application Of: Benny PESACH et al.

Application No. 10/519,024	Filing Date LA. June 25, 2003	Examiner Unknown	Customer No. 44909	Group Art Unit Unknown	Confirmation No. 3303
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Invention: METHOD AND APPARATUS FOR DETERMINING TISSUE VIABILITY

TO THE COMMISSIONER FOR PATENTS:

Mail Stop Missing Parts

The fee of \$795.00 is to be paid as follows:

- ☐ A check in the amount of the fee is enclosed.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 03-3419
- ☒ If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. 03-3419
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

  
Signature

Allan C. ENTIS, Reg. No. 52,866

William H. Dippert, Esq.  
Wolf, Block, Schorr & Solis-Cohen LLP  
250 Park Avenue  
New York, NY 10177

Tel: (212) 986-1116

Dated: November 30, 2005


I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

(Date)

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

cc:

<b>TRANSMITTAL LETTER</b> <b>(General - Patent Pending)</b>				Docket No. 227/04279	
In Re Application Of: <b>Benny PESACH et al.</b>					
Application No. 10/519,024	Filing Date L.A. June 25, 2003	Examiner Unknown	Customer No. 44909	Group Art Unit Unknown	Confirmation No. 3303
Title: <b>METHOD AND APPARATUS FOR DETERMINING TISSUE VIABILITY</b>					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is: <b>Power of Attorney including Statement under 37 CFR 3.73(b) and copy of an assignment</b>					
in the above identified application.					
<input checked="" type="checkbox"/> No additional fee is required. <input type="checkbox"/> A check in the amount of _____ is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <b>03-3419</b> as described below.					
<input type="checkbox"/> Charge the amount of _____ <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional fee required.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 Signature			Dated: <b>November 30, 2005</b>		
Allan C. ENTIS, Reg. No. 52,866					
William H. Dippert, Esq. Wolf, Block, Schorr & Solis-Cohen LLP 250 Park Avenue New York, NY 10177  Tel: (212) 986-1116			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____  _____ (Date)		
cc:			_____ Signature of Person Mailing Correspondence		
			_____ Typed or Printed Name of Person Mailing Correspondence		

P18A/REV03

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PTO/SB92 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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### Certificate of Express Mail Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service Express Mail under 37 CFR 1.10 on the date indicated below and is addressed to:

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on November 30, 2005

Date

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New York, New York 10177-0030  
Telephone: 212.986.1116; Facsimile: 212.986.0604

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Applicant: Benny Pesach et al.  
Serial No: 10/519,024  
IA Filing Date: June 25, 2003  
For: Method And Apparatus For Determining Tissue Viability  
Enclosures: (1) Response To Notice To File Missing Parts (4 pages);  
(2) Copy of Said Notice (2 pages); (3) Executed Declaration (1 page);  
(4) Transmittal Letter (In Duplicate); (5) Executed Power of Attorney (1 Page);  
(6) Executed Statement Under 37 CFR §3.73(b) (1 Page) w/copy of Executed Assignment (1 Page);  
(7) Acknowledgement postcard